

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>CMA</i>	67477	04/10/02
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	12/02	
2	✓	02	
3	✓	02	
4	✓	02	
5	✓	02	
6	✓	02	
7	✓	02	
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42	✓	02	
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45	✓	02	
46	✓	02	
47	✓	02	
48	✓	02	
49	✓	02	
50	✓	02	

Claim	Final	Original	Date
51	✓	14/02	
52	✓	02	
53	✓	02	
54	✓	02	
55	✓	02	
56	✓	02	
57	✓	02	
58	✓	02	
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96	✓	02	
97	✓	02	
98	✓	02	
99	✓	02	
100	✓	02	

Claim	Final	Original	Date
101	✓	02	
102	✓	02	
103	✓	02	
104	✓	02	
105	✓	02	
106	✓	02	
107	✓	02	
108	✓	02	
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141	✓	02	
142	✓	02	
143	✓	02	
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145	✓	02	
146	✓	02	
147	✓	02	
148	✓	02	
149	✓	02	
150	✓	02	

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)